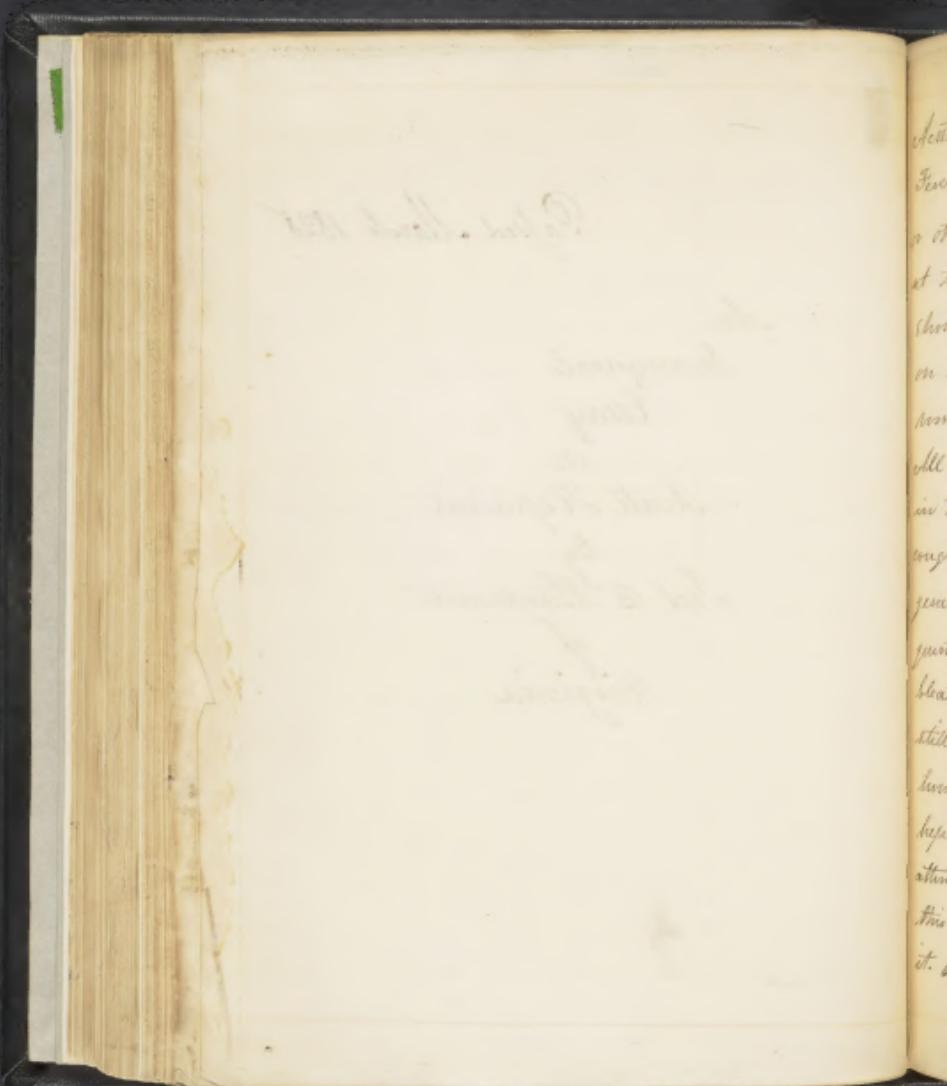


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An  
Inaugural  
Essay  
on  
Acute Hepatitis  
By  
Joel B. Sturdivant  
of  
Virginia



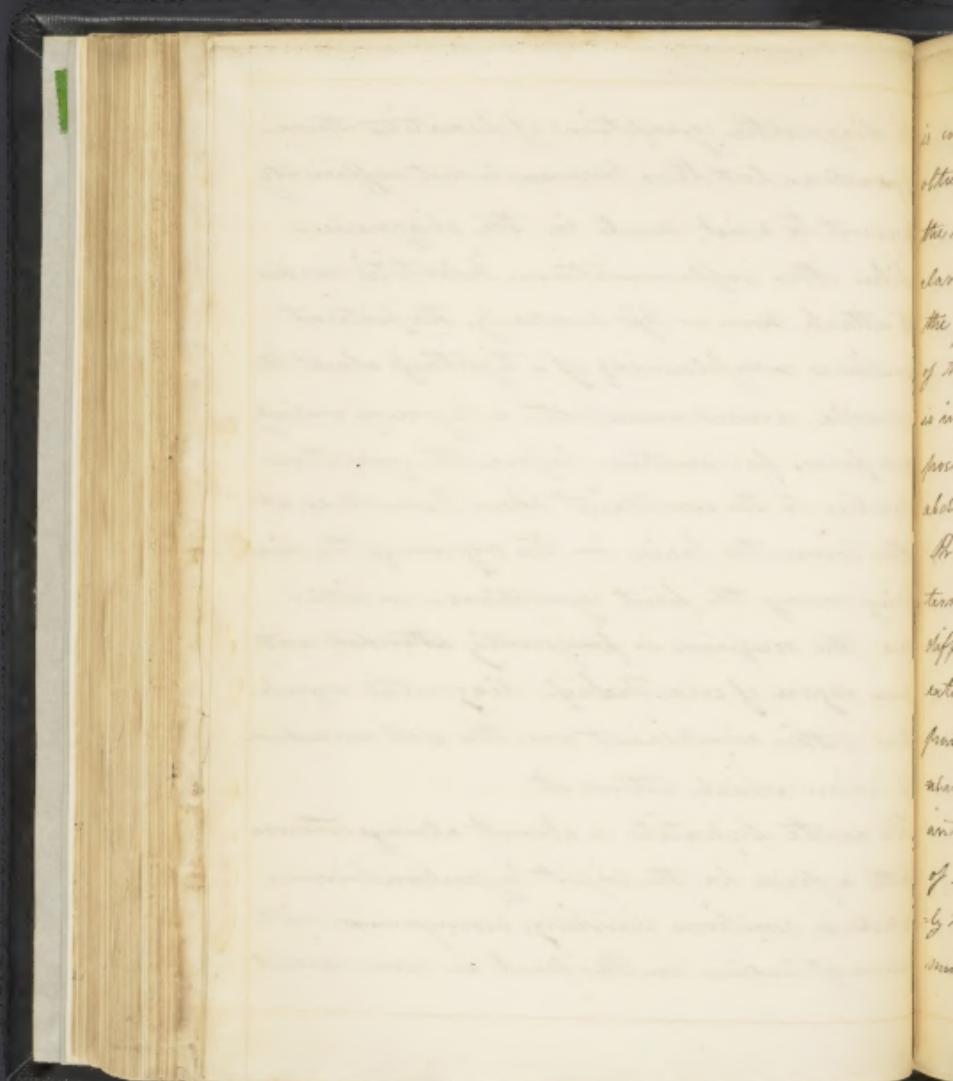
Acute Hepatitis is defined by Doct Cullen  
Fever, tension and pain, either pungent  
or obtuse, of the right hypochondrium, pain  
at the clavicle and top of the right  
shoulder, the patient lying with difficulty  
on the left side; dyspnoea, a dry cough,  
vomiting and hiccups

All of these symptoms, are rarely met with  
in the same case. When the dyspnoea and  
cough are considerable for instance, there is  
generally no vomiting; and when there is fre-  
quent vomiting, the patient is seldom trou-  
bled with a great degree of dyspnoea, and  
still more rarely with a cough. His mepaz,  
however, to mention in the definition of  
hepatitis, symptoms which only occasionally  
attend, because the constant symptoms of  
this complaint are not sufficient to distinguish  
it. On this account some have ranked among

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the diagnostic symptom of hepatitis those  
of jaundice, but their presence is not sufficiently  
frequent to assist much in the diagnosis.—  
Like other inflammations, hepatitis makes  
its attack more or less suddenly, the patient  
sometimes complaining of a tightness about the  
pneumonia, accompanied with a degree of anxiety  
and fever, for sometime before the symptoms  
peculiar to the complaint shew themselves; at  
other times the pain in the region of the liver  
being among the first symptoms—in either  
case the acusior is frequently attended with  
some degree of cold. The chief diagnostic sym-  
ptoms of this complaint are, the seat and kind  
of pain which attains it.

The acute hepatitis is almost always attended  
with a pain in the right hypochondrium,  
which is sometimes shooting, accompanied with  
a sense of tension in the part; in some cases it



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is constant and severe, in other deep seated and  
oblique. - The pain, however, is not confined to  
the region of the liver; it extends to the breast,  
clavicle and shoulder of the right side, and in  
the part is often more acute than in the rest  
of the disease. The pain of the hypochondrium  
is increased on pressure especially when the  
position of the body is such as to relax the  
abdominal muscles.

Practitioners have been at some pains to de-  
termine what part of the liver is affected in  
different cases of hepaticitis. When the pain  
extends to the clavicle and chest, the convex  
part has been found most frequently affected  
when it is much increased on pressure, the  
anterior part of the liver is the chief seat  
of the disease. When the pain extends chief-  
ly to the region of the stomach, and is not  
much increased on pressure of the right

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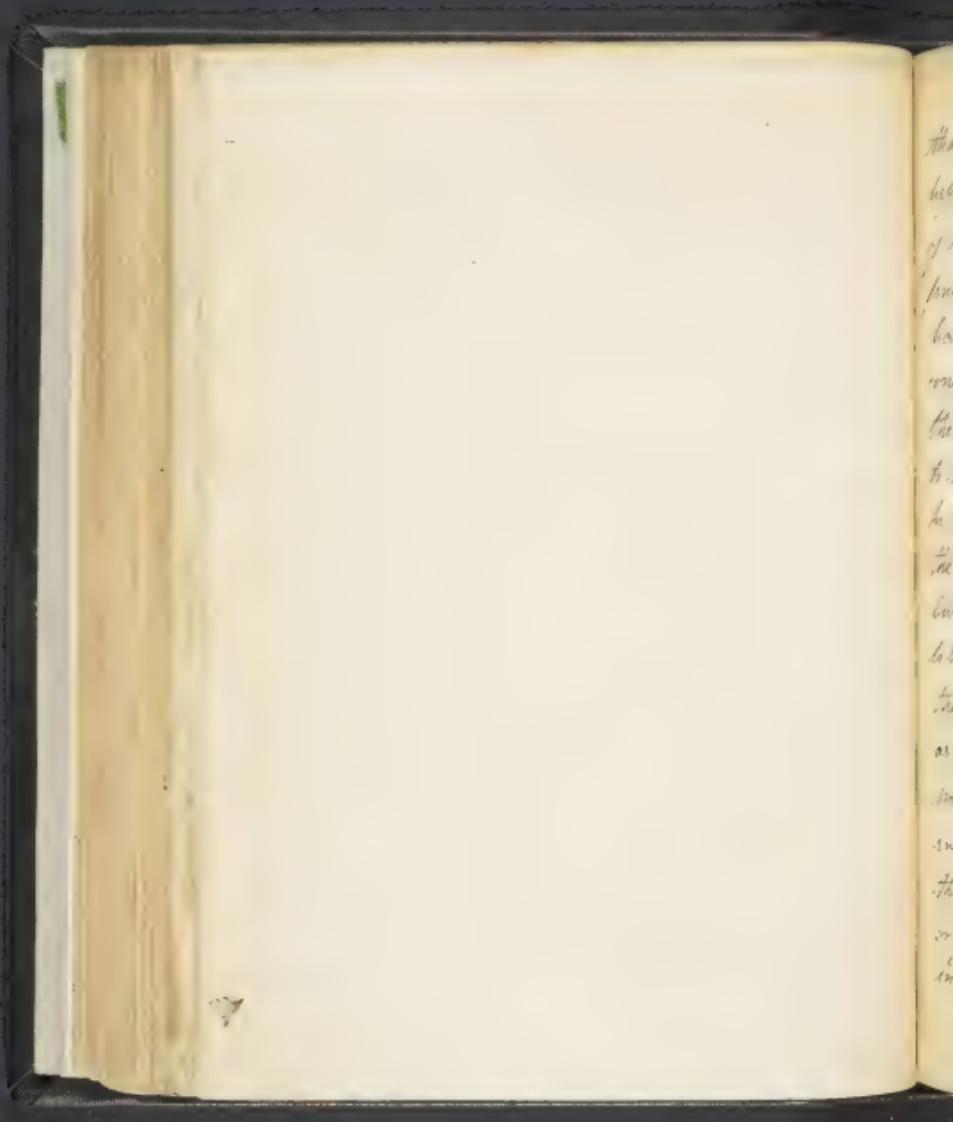
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hydrocephalium, there is then reason to believe that the inflammation chiefly occupies the convexe part, in which case the pain sometimes extends to the abdominal muscles, the complaint has been mistaken for an inflammation of them.

In this, as in other visceral inflammations, the kind of pain has been supposed to point out whether the membrane or parenchyma is the seat of the disease; in the former case the pain being acute, in the latter obtuse. This observation, however, is not to be depended upon. It has been observed by some, that when pain of the shoulder attends hepatitis, its seat generally corresponds with the part of the liver most affected, being anterior or posterior, according as the anterior or posterior parts of the liver are the seats of the disease. When inflammation at-

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strikes the left lobe, the pain is often in the left shoulder others say that it is sometimes in both scapulae, and now and then felt in the left side under the lower false ribs. It is generally most severe when the patient lies on the left side; sometimes though rarely, when on the right side; in many cases he finds himself easiest on the back, with the head low. The pain of the side, as well as the shoulder is often increased during inspiration, which is impeded by it. as might be supposed, it is most so when the parts nearest the diaphragm are inflamed; it is in these cases too, that the cough which accompanies this complaint is most severe, and that his keeps most frequently succeeds. The cough is generally short, dry, and frequent, and the hickory which is never a favourable symptom, is sometimes violent.



that materially interferes with respiration. When hepatitis is attended with cough and difficulty of breathing it may be easily mistaken for pneumonia; dissections have shown this to have happened frequently. When the concave surface of the liver is much inflamed the inflammation sometimes actually spreads to the diastragm and even to the lungs. Inflammation of this part of the liver the external swelling is often considerable, but the inflammation is seldom communicated to the skin. When the concave part is affected the stomach portakes of the diarrhoea as much as the lungs do in the former case, the nausea and vomiting being more urgent than in the other forms of hepatitis, and here the cough and dyspnoea are either wanting or present in a much less degree. In most instances the secretion of bile is increased.

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ma it sometimes happens, that its flow into  
the intestines is impeded generally, perhaps  
by a contraction of the coats - the veins white  
of the eyes, and urine are then tinged with  
yellow as in jaundice.

Inflammation of this part of the liver  
also is generally attended with the same ana-  
lity and debility, though perhaps generally  
in a less degree, which affords a distinction  
from which it is often difficult to distinguish  
it. The truth is, that although there are  
many cases of pneumonia, gastritis, and  
hepatitis, in which the characteristic  
symptoms of each being distinct, there  
can be no doubt respecting the seat of  
the disease, yet, from vicinity of the  
lungs, liver, and stomach, the sympathetic  
or those nerves, in addition with which the  
pneumic seat of infection, gains a certaina-

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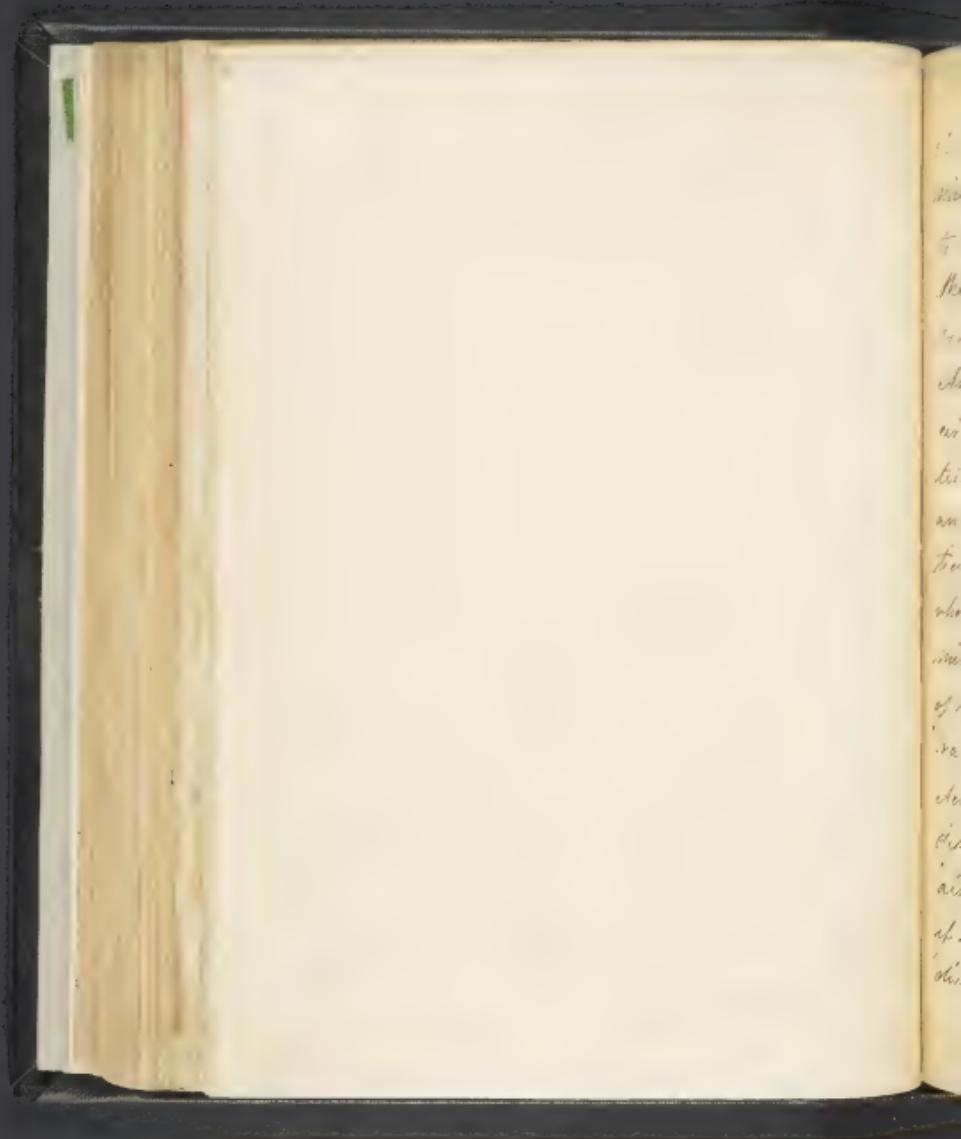
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above all, the tendency of inflammation to spread to neighbouring parts, these complaints are sometimes confounded w<sup>th</sup> the most discom-  
ing. The pulse, when the concave part of  
the liver is affected, is often small and  
feeble; in other cases it is swa<sup>re</sup> & turgid, in  
all, hard. The urine whether tinged with  
bile or not, is generally high coloured, the  
heat and thirst considerable, the mouth  
dry, and the tongue covered with a white  
yellowish crust, which in the progress  
of the disease often assumes a dark, or  
even a black colour. The strength is re-  
duced by continual watching; and delirium  
sometimes, though not frequently, superven-  
ient. In some cases the bowels are consti-  
tive, in others a diarrhoea comes on, with  
gripping pains, and bilious stools.  
The tendency to resolution, as of other



similar complaint is known by the general malice of the symptoms, and their yielding to the former remedies, particularly by their being either dyspepsia, cough, hiccup, vomiting, diarrhoea or delirium.

As in other febrile diseases there are certain symptoms which frequently attend the favourable termination of hepatitis, and among these are hemorrhages, particularly those from the nose and hemorrhoidal vessels. Hepatitis is sometimes terminated by sweat. An increased secretion of mucus from the lungs is also to be ranked among the crisis of the complaint. A copious discharge of high-coloured mucus depositing a red or whitish sediment is also a favourable symptom, particularly if it appears in the early stages of the disease. When hepatitis is terminated

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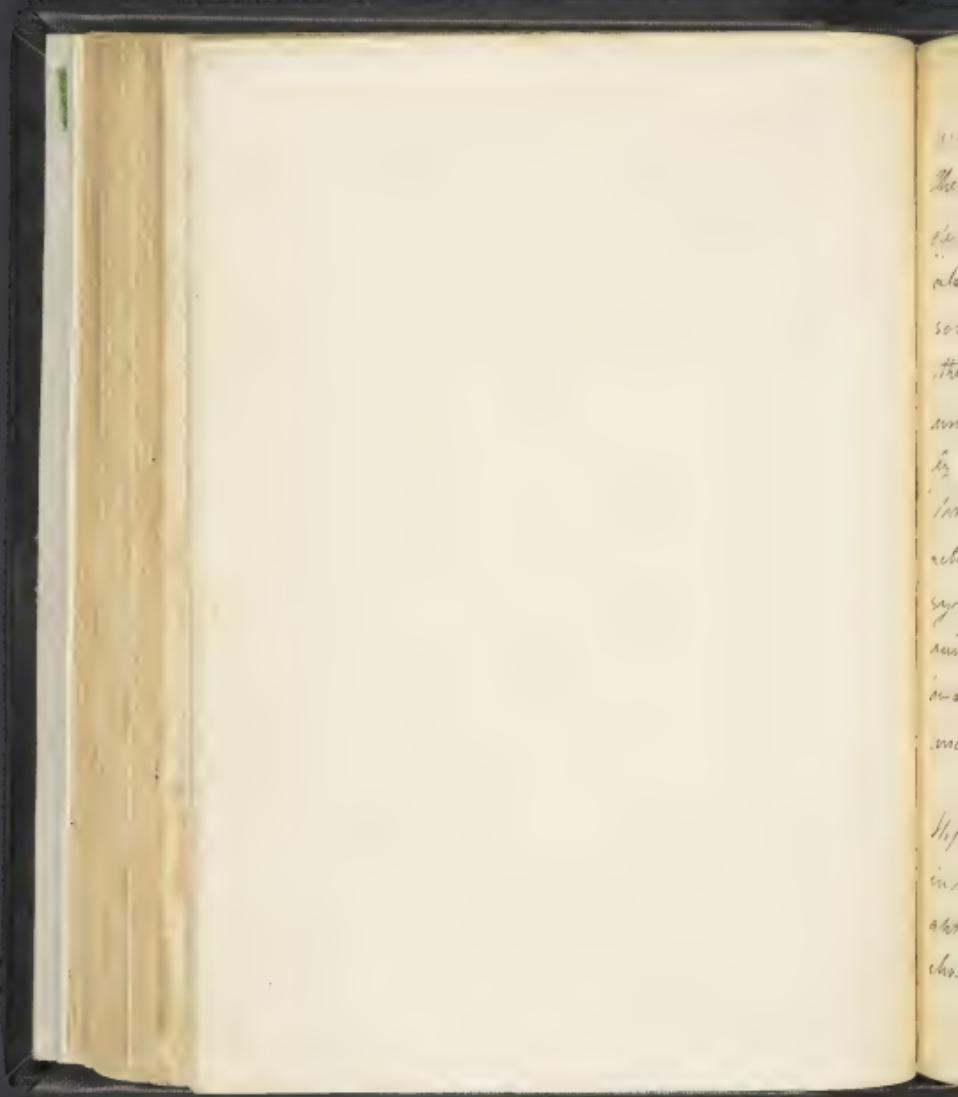
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by resolution, is generally within four or five days; and if it last to the seventh or ninth day, it often terminates in suppuration. Resolution is the only termination of hepatitis which can be regarded as favourable, although suppuration is upon the whole, less fatal here than in most other visceral inflammations. There are few of the viscera in which inflammation is more apt to run to suppuration than the liver.

As soon as suppuration takes place, the pain lessens, and there is generally a sense of weight and fulness in the region of the liver, the former being increased by lying on the left side. There is also in this stage of the disease frequent shiverings, at length hectic fever. In many cases there is an evident tumor



and fluctuation may be readily felt. The danger from suppuration in hepatitis depends much upon the seat of the abscess. Hepatitis, though very rarely, sometimes terminates in gangrene, and the tendency to it is known by an unusual violence of the symptoms, rapidly increasing, and not yielding to the proper remedies. When gangrene has actually supervened, the inflammatory symptoms subside suddenly, cold sweats supervening, and the pulse becoming weak and fluttering; with constant shivering and cold extremities.

### Causes

Hepatitis is more frequent in the warm than in the cold or temperate climates - It is more apt to attack those of a choleric and melancholic temperament, and it has been no-

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marked. Not adult, are ~~are~~ more subject to it than those under puberty. Among the most frequent causes of hepatitis may be seen head contusions, especially such as occasion a fracture of the cranium. Blows or contusions on other parts of the body, however often excite this disease. Violent passions of the mind, particularly ~~and~~ the depressing passions, are to be ranked among the causes of hepatitis. The constant application of a great degree of heat in any form, especially the rays of a vertical sun on the head, is a frequent cause of hepatitis. The concretions which are frequently formed in the gall bladder and ducts may be mentioned among the causes of hepatitis. Like other inflammatory diseases it often arises from the superposition of some habitual <sup>such as</sup> particularly from that of the haemorrhoids.

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## Treatment

The treatment of hepatitis so nearly resembles that of other inflammatory diseases, <sup>with</sup> that it is not necessary to speak of it at length. Blood letting should be early resorted to, and its extent adopted to the greater or less violence of the inflammatory symptoms, always bearing in mind the propensitology of this disease to suppuration. When the pulse is hard and the pain urgent, blood letting may be had recourse to at any period of the disease without regard to the day. Cathartics are employed with great advantage in hepatitis, saline cathartics largely diluted, have been greatly recommended in this disease, but mercurial cathartics even better adopted to this disease than any others. The local medicines and the mode of employing them, are the same as in other visceral inflammations. Blisters should be had recourse to as soon

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as the high action of the blood vessels is suffi-  
ciently reduced to insure their beneficial  
effects. local bloodletting when the strength is  
too much reduced to admit of general bleed-  
ing, by means of cupping glasses or leeches may  
be resorted to, and there too, may be used  
with great advantage in the early stage  
of this disease.

